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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION
Attorney Docket No. 5405-232DV

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled DELETED ADENOVIRUS VECTORS AND METHODS OF MAKING AND ADMINISTERING THE SAME,			
the specification of whi	ch		
is attached hereto			
OR			
was filed on October	r 5, 2001 as United S	States Application No. 09/97	72,794.
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.			
None			☐ Yes ☐ No
Number	Country	MM/DD/YYYY Filed	Priority Claimed
			☐ Yes ☐ No
Number	Country	MM/DD/YYYY Filed	Priority Claimed
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